

# *Dateline DHMH*

Maryland Department of Health and Mental Hygiene

## *A Message from the Secretary*

Last month, I wrote about the need for DHMH to focus on stabilizing our budget while continuing to maintain the high quality of services that we deliver to our customers — the citizens of Maryland.

This month, I would like to focus on some of our legislative proposals and provide a perspective on the budget.

To begin with, we will ask for no new initiatives or expansion of existing programs during this session of the Maryland General Assembly. This does not mean, however, that we will sit on the sidelines.

There are two bills we are proposing that affect two important and vulnerable populations: children, and adults in need of care.

One is a tobacco enforcement bill. If passed, it will further restrict under-age access to tobacco products.

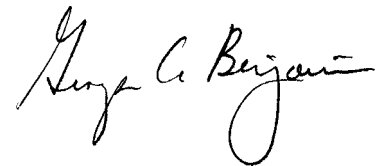
The second bill is designed to provide the Office of Health Care Quality with the ability to sanction adult day care centers that are not in compliance with regulations or are providing poor quality of care.

Financially, Governor Glendening has included in his proposed budget an increase of \$588 million, of which \$305 million targets health care. Although this may seem like a lot, this increase is designed to help us maintain the level of service we currently provide.

The Governor has proposed an additional \$37 million for the developmentally disabled, \$25 million for community mental health and \$15 million for drug treatment. Also, the budget contains a Medicaid increase of \$367 million to fill a gap in

the current budget as well as cover expenditures in the next fiscal year.

Although this will be a relatively quiet season in terms of DHMH-sponsored proposals, it will be an important General Assembly session. Tough decisions need to be made in an economy that challenges us to fulfill our mission. I know the talents we all possess will help us be successful.



## **Black History Month**

You are invited to be a part of the DHMH celebration of Black History Month on Wednesday, February 27, beginning at 10:30 a.m. in the O'Connor Building lobby.

Highlights at this annual event include welcoming honorees from the business community; musical entertainment from the Coppin State University Choir and the Frederick Douglas High School Jazz Band; and information from community health organizations on programs that serve the community.

Also, among many free screenings are those for blood pressure, diabetes, vision, and cholesterol.

If you would like more information about the Black History Month celebration, please contact the Office of Community Relations at 410-767-6600 during business hours.

## HealthChoice Report Shows Improvement

*HealthChoice*, the Maryland Medicaid managed care program, has improved access to health services while controlling health care costs, according to a DHMH report, “*HealthChoice Evaluation*.”

This report, the first comprehensive evaluation of the four-year-old *HealthChoice* program, found that *HealthChoice* should continue as the health service delivery system for current enrollees.

Key findings of the evaluation reveal the following:

- *HealthChoice* serves a much larger and different population than before, and is the platform for a major program expansion;
- *HealthChoice* helps more people, particularly children, access health care services overall;
- *HealthChoice* saves money relative to what would have been spent on the fee-for-service delivery system, and adds value to the program for consumers;
- Improvements in access may be threatened by potentially diminishing numbers of physicians participating in *HealthChoice*; and
- Despite the successes of the program, progress is not uniform across the range of populations served.

Areas of improvement have been identified and key changes need

*Frostburg State University student William Dowen (on ladder) was one of many volunteers to help the Joseph D. Brandenburg Center get ready for the holidays. Dowen is assisted by Jeremy Roman (holding the ladder) and another friend in the decoration of the Center's Nature Tree.*



to be made to ensure that the program continues to improve access to high quality care for all enrollees. The Department has already begun implementing key recommendations of the report in the first steps of a multi-year process of improvement.

The recommendations fall under seven broad categories: establishing a long term priority-setting process; maintaining the current MCO-based capitated program, but developing a back-up managed care system; improving provider networks; promoting increased quality of care and improved program performance; improving the program for consumers; improving the delivery of special services; and establishing strategies to stabilize the managed care system.

A primary challenge faced by the program is dealing with the possibility that fewer physicians will participate in *HealthChoice*. A key finding of the report is the need to increase physician fees. Governor Glendening addresses this need in his FY 2003 budget by increasing Medicaid physician fees by \$50 million from state and federal funds. Physician fees for the *HealthChoice* program alone would increase by more than \$40 million.

The report was prepared by DHMH after consultation with expert advisors and stakeholders, including consumers, managed care organizations, providers, advocates, and the General Assembly. Their comments and suggestions were central to designing and conducting the evaluation and developing recommendations. Collaboration among DHMH, other state and local agencies, MCOs, providers, advocates, consumers, and other stakeholders has been and will continue to be central to the successful implementation of all of the recommendations.

The full *HealthChoice* evaluation report and executive summary are available on the DHMH Web site at <http://www.dhmf.state.md.us/html/hotissues.htm> .

## DHMH Exceeds MCC Goal

DHMH employees rose to the occasion during last fall's Maryland Charity Campaign and easily surpassed its goal of \$287,123. As of January 14, DHMH employees pledged \$346,588, exceeding the campaign goal by 121 percent!

The Department's effort helped make campaign history and surpass the statewide target of raising \$4 million. The statewide total of \$4,016,221 is the most money pledged to the Maryland Charity Campaign in one year.

Dr. Benjamin, Assistant Campaign Chairperson for the 2001 drive, sincerely thanks everyone for making this the most successful fundraiser in its history. Thanks also to DHMH employees Charles Fleming, who served as the state coordinator, and Clifford Smith, who managed the loaned executive component.

## Osteoporosis and African-American Women

It's no secret that osteoporosis is a serious health risk for women, especially in the years following menopause. What is not so well known is that African-American women are at special risk for this disease, due in part to a diet that lacks adequate calcium.

Osteoporosis is characterized by low bone mass, which makes bones fragile and more easily fractured. Fractures can result in pain, deformity, and over time, even loss of height.

While studies show that African-American women actually have higher bone mineral density than white woman, African-American women are at more risk of serious complications related to fractures.

As African-American women age, their risk for hip fracture doubles approximately every seven years. African-American women are more likely than white women to die following a hip fracture. Also, other diseases more common among African-Americans, such as sickle-cell anemia and the most serious form of lupus, have been linked to increased risk of osteoporosis.

Nutrition plays an important role in women's overall risk of osteoporosis. Because calcium helps prevent bone loss, adequate dietary calcium is essential for women. Studies show that on average, African-American women consume only about half the Recommended Daily Allowance of calcium they need.

One reason for this may be lactose intolerance, or the inability to digest the sugar found in milk and other dairy products. As many as 75 percent of all African-Americans are lactose intolerant.

While milk and other dairy products such as cheese and yogurt are the best calcium sources, vegetables like spinach, broccoli, turnip greens, mustard greens, and kale also contain calcium. Fish with edible bones, like sardines and salmon, also contain high calcium levels. Certain foods and beverages, such as some cereals and orange juice, are available calcium-fortified, and calcium supplements are available over the counter.

Unfortunately, calcium-rich diets do not eliminate the risk of osteoporosis. Other risk factors include thinness or small frame; a family history of osteoporosis; lack of adequate physical activity; smoking; and excessive alcohol intake.

If you are concerned about your risk, ask your doctor about a bone density test. This is used to determine if treatment or prevention options are necessary. There is no cure for osteoporosis, but drugs are available to slow further bone loss and reduce the risk of fractures.

## Don't Forget

Applications for the Department's Performance Excellence Awards are being accepted until February 15.

Individual awards are presented in nine job categories for either customer satisfaction, innovation or leadership, and in two team categories. Awardees will receive a framed certificate and, if funding is available, a monetary award not to exceed \$300. A special ceremony will be held in June to present the awards.

Nomination information and forms are available on the DHMH Web site at [www.dhmh.state.md.us/pe/html/perfawards.htm](http://www.dhmh.state.md.us/pe/html/perfawards.htm) or on the Intranet at *indhmh* (click on 'Performance Excellence Awards.')

More information is available by contacting Lee Williamson at 410-767-5190 or by e-mail at [lwilliamson@dhmh.state.md.us](mailto:lwilliamson@dhmh.state.md.us).

## Health-Packed Meetings

It's February and another long year of meetings lies ahead. If you usually "bring the doughnuts," make this a healthier year by changing your habit. Planning the food for a morning meeting or snacks for meeting breaks is easy if you keep one principle in mind — *choice*.

Healthy eating for good nutrition means balancing less healthy choices with healthier ones. Guidelines for choosing foods come from the Food Guide Pyramid and the Dietary Guidelines for Americans — more fruits, vegetables, and whole grains and less saturated fat, salt and sugar.

"Wait," you are saying to yourself, "won't that be boring, bland and unacceptable?" People enjoy doughnuts and cookies, but they are also pleased to find refreshing fruit, juice and lower fat baked goods at meetings. Try some of the following tasty snacks at your next meeting along with the "usual," if you like:

Mini muffins; Mini bagels with low-fat cream cheese and/or jam; Trail mix; Low fat granola bars; Bean dip and low-fat chips; Fresh, frozen, canned, or dried fruit; Fresh, frozen, or canned vegetables; Light popcorn; Fruit juice; Water; Low-fat, fat-free milk.

Notice the word "mini" before muffins and bagels. Keeping baked goods small helps people control the amount they eat while helping you control costs. A large bakery muffin can easily contain over 400 calories and 18 grams of fat -- too high a percentage of the day's intake for most

people. And at \$1.50 or so, they can also break a budget.

Get this year off to a good start with 'good taste' and good nutrition by adding healthy choices to your meetings. And when you get tired of sitting so much — get up and move! Meeting participants will be more attentive and energetic if you feed them well and offer activity.

*Editor's Note: Thanks to the staff in the Family Health Administration's Division of Cardiovascular Health and Nutrition for writing this article.*

## Use E-file to get Faster State Tax Return

The State Comptroller's Office reminds State employees that three options are available to electronically file tax returns: file on the Comptroller's Office Web site for free, go to a professional preparer, or use software on your own PC.

E-filing is fast, convenient and safe.

You get immediate confirmation that your return was received, and your refund can be deposited in as little as 48 hours — there are no forms, stamps, envelopes or trips to the post office. And, errors are corrected for you.

If you owe taxes, you can file electronically and pay later with a credit card at [www.officialpayments.com](http://www.officialpayments.com) or over the telephone at 1-800-2PAYTAX. Also, this year, for the first time, taxpayers can pay additional tax by electronic funds transfer (direct debit).

On-line filers can also be assured

of safety, as most Internet sites are equipped to prevent unauthorized people from seeing the data sent. Filers using the Comptroller's Web site also get an acknowledgment that the return was accepted.

You can find helpful information, download state tax forms and even file electronically when you visit the Comptroller's Web site at [www.marylandtaxes.com](http://www.marylandtaxes.com). You can also e-mail your state tax questions to [taxhelp@comp.state.md.us](mailto:taxhelp@comp.state.md.us).

Personal assistance is available at all of the Comptroller's 20 taxpayer service offices located throughout Maryland. Offices are open Monday through Friday, from 8:00 a.m. until 5:00 p.m. You can also call 410-260-7980 from Central Maryland or 1-800-MD TAXES (1-800-638-2937) from elsewhere for free state tax help.



STATE OF MARYLAND

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